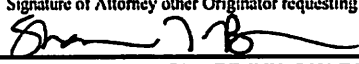



U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER 5:23-CR-00039-01	
DEFENDANT WILLIAM ROSS HICKMAN		TYPE OF PROCESS See Attachment A	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Nash Johnson and Son's Farms, Inc. thru Ascensus Trust, Plan Administrator		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1655 43rd Street S., Suite 100, Fargo, ND 58103		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285 3	
United States Attorney's Office 300 Fannin Street, Suite 3201 Shreveport, LA 71101-3068		Number of parties to be served in this case 4	
		Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Should you have any questions, call Sheila Still at (318) 676-3622			
Signature of Attorney other Originator requesting service on behalf of: 		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (318) 676-3600
			DATE 08/15/2023
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 3	District of Origin No 35	District to Serve No ND
Signature of Authorized USMS Deputy or Clerk D/ND		Date CW 8/18/23	
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.			
<input checked="" type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)			
Name and title of individual served (if not shown above)		Date 9/28/23	Time 3:30 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
Address (complete only different than shown above)		Signature of U.S. Marshal or Deputy  (SDUSM)	
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges
Advance Deposits		Amount owed to U.S. Marshal* or (Amount of Refund*)	

REMARKS

1 SDUSM - 1hr
miles Round trip - 12mi

returned unexecuted - The Address listed for Ascensus is no longer correct, in fact it was completely empty office space. I called the 1800 # from their web site to see if they moved to a new location in Fargo, ND. I was told that their offices had all closed up + that everyone teleworks. I was told there is no longer an office in North Dakota.

PRIOR VERSIONS OF THIS FORM ARE OBSOLETE

Form USM-285
Rev. 11/18